PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Numbe	Αp	plication	ı or	Docket	Numbe
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5 × B - C/00

CLAIMS AS FILED - PART I (Column 1)			SMALL ENTITY (Column 2) TYPE		OTHER THAN OR SMALL ENTITY							
TOTAL CLAIMS			HI		:-1		l	RATE FEE		1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	H (min	ninus 20= 2 (0)			X\$ 9=		OR	X\$18=	378.	
INDEPENDENT CLAIMS minus 3 =				*	V		X40=		OR	X80=	160.0	
MULTIPLE DEPENDENT CLAIM PRESENT								.405		1		700.8
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2		+135=		OR	+270=	10 0
								TOTAL		OR	TOTAL OTHER	1248'c
	(Column 1) (Colum				mn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***		=	П	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	ENDENT	CLAIM		l I	+135=		OR	+270=	
••							L	TOTAL ADDIT. FEE			TOTAL ADDIT. FEE.	
		(Column 1)		(Colur		(Column 3)		NDDII. FEE		,	ADDII. FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT B	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JETIPLE DEP	ENDEN	CLAIM	<u> </u>	ا ا	+135=		OR	+270=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)	•				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	ĩ
	Independent	•	Minus	***		=]	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		┨┞					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL OR +270=												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number of the convention box in column 1.											L	